Case 20-19290 Doc 22 Filed 11/11/20 Page 1 of 26

	n this information to identi				
Deb	tor 1 Andre A S	mall Middle Name	Last Name		
	tor 2 se if, filing) First Name	Middle Name	Last Name		
	. 3,				
Onii	ed States Bankruptcy Court f	DISTRICT OF MAR	TLAND		
Cas (if kno	e number 20-19290 own)			□ Che	ck if this is an
,	,				nded filing
Off	icial Form 106Sเ	ım			
Su	mmary of Your As	sets and Liabilities	and Certain Statistical Information		12/15
			ple are filing together, both are equally responsible for e the information on this form. If you are filing amend		
			neck the box at the top of this page.		,
Part	1: Summarize Your Ass	ets			
					assets
				Value	of what you own
1.	Schedule A/B: Property (C 1a. Copy line 55, Total real			\$	259,000.00
			/B	\$	21,090.00
	1c. Copy line 63, Total of all	property on Schedule A/B		\$	280,090.00
Part	2: Summarize Your Liab	ilities			
				Your	liabilities
					int you owe
2.		Have Claims Secured by Prop in Column A, <i>Amount of claim</i>	erty (Official Form 106D), at the bottom of the last page of Part 1 of Schedule D	\$	251,264.00
3.		o <i>Have Unsecured Claims</i> (Ofform Part 1 (priority unsecured c	icial Form 106E/F) laims) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from	om Part 2 (nonpriority unsecure	ed claims) from line 6j of Schedule E/F	\$	65,333.66
	,,	, , ,	, .	· –	
			Your total liabilities	\$	316,597.66
Part	3: Summarize Your Inco	me and Expenses			
4.	Schedule I: Your Income (O	ficial Form 106I)			
٦.			dule I	\$	5,800.00
5.	Schedule J: Your Expenses Copy your monthly expense			\$	6,507.00
Part	4: Answer These Questi	ons for Administrative and S	statistical Records		
6.		cy under Chapters 7, 11, or or or or or or or the form	13? n. Check this box and submit this form to the court with you	ur other s	chedules.
7.	Yes What kind of debt do you	nave?			
1.	·				
			ner debts are those "incurred by an individual primarily for 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Andre A Small Case number (if known) 20-19290

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,800.00

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	23,984.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	23,984.00

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Fill in this informatio							
	n to identify your o	case and this filir	ng:				
	ndre A Small	AC.1 II. A1					
Fir Debtor 2	st Name	Middle Name	Last Name				
	st Name	Middle Name	Last Name				
Jnited States Bankrup	tcy Court for the:	DISTRICT OF MA	ARYLAND				
Case number 20-19	9290						Check if this is an amended filing
nink it fits best. Be as o	VB: Proposed list and describe omplete and accurate	e items. List an ass te as possible. If tw	et only once. If an asset fits in mo o married people are filing togeth o this form. On the top of any addi	her, both are e	qually respons	sible for suppl	lying correct
Do you own or have a	ny legal or equitable	interest in any res	idence, building, land, or similar p	property?			
☐ No. Go to Part 2. ☐ Yes. Where is the p	property?						
Yes. Where is the p	, ,		aat is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative	ply	the amount of	any secured cl	s or exemptions. Put laims on <i>Schedule D:</i> Secured by Property.
Yes. Where is the p	k Way able, or other description MD 2111	[] [] 17-0000	☐ Single-family home ☐ Duplex or multi-unit building	ply	the amount of Creditors Who Current value entire propert \$259, Describe the	any secured clothard Plane Claims in the clothard plane Claims in the clothard plane Claims in the claim in t	laims on Schedule D: Secured by Property. Current value of the cortion you own? \$259,000.00
Yes. Where is the part of the	k Way able, or other description MD 2111	17-0000 [CIP Code [CIP COd	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare		the amount of Creditors Who Current value entire propert \$259, Describe the	any secured clop Have Claims see of the cty? p.000.00 nature of your simple, tenance	laims on Schedule D: Secured by Property. Current value of the portion you own? \$259,000.0

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Deb	btor 1 Andre A Small		Case number (if known)	20-19290
3. C	Cars, vans, trucks, tractors, sport utilit	ty vehicles, motorcycles		
_] No			
	I Yes			
	• 165			
3.1	1 Make:	Who has an interest in the property? Check one		ured claims or exemptions. Put
0.	Model:	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	Debtor 2 only	Current value of t	he Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Car	Check if this is community property (see instructions)	\$20,000	.00 \$20,000.00
E. □	ixamples: Boats, trailers, motors, personate No Yes Add the dollar value of the portion you	/s and other recreational vehicles, other vehicles, al watercraft, fishing vessels, snowmobiles, motorcycl	e accessories any entries for	\$20,000.00
Par	t 3: Describe Your Personal and Househo	old Items		
Do	you own or have any legal or equitab	le interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
[Household goods and furnishings Examples: Major appliances, furniture, lin ☐ No ☐ Yes. Describe	nens, china, kitchenware		
	routine hou Location: 94	sehold furnishings and goods 402 HIGH ROCK WAY, Owings Mills MD 2111	7	\$350.00
[Electronics Examples: Televisions and radios; audio including cell phones, camera No Yes. Describe phone, tvs,	o, video, stereo, and digital equipment; computers, prir as, media players, games	nters, scanners; music co	ollections; electronic devices
	priorie, tvs,			Ψ200.00
	Collectibles of value Examples: Antiques and figurines; paintion other collections, memorabilis No Yes. Describe	ngs, prints, or other artwork; books, pictures, or other a, collectibles	art objects; stamp, coin,	or baseball card collections;
_	Equipment for sports and hobbies Examples: Sports, photographic, exercis musical instruments No	e, and other hobby equipment; bicycles, pool tables, o	golf clubs, skis; canoes a	and kayaks; carpentry tools;
	☐ Yes. Describe			
	Firearms Examples: Pistols, rifles, shotguns, am ■ No	munition, and related equipment		
	cial Form 106A/B	Schedule A/B: Property		page

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	Andre A Small		Case nu	mber (if known)	20-19290
☐ Yes.	. Describe				
☐ No		es, furs, leather coats, desiç	gner wear, shoes, accessories		
		nisc. clothing .ocation: 9402 HIGH RC	OCK WAY, Owings Mills MD 21117		\$0.00
■ No		.ry, costume jewelry, engago	ement rings, wedding rings, heirloom jewelry, wa	atches, gems, g	old, silver
Exam ■ No	arm animals ples: Dogs, cats, bird Describe	ds, horses			
14. Any o		·	ot already list, including any health aids you	did not list	
			rt 3, including any entries for pages you have	e attached	\$550.00
Part 4: De	escribe Your Financial	Assets			
		al or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No			ne, in a safe deposit box, and on hand when you	u file your petitio	on
Exam		e in your wallet, in your hor			on \$40.00
Exam ☐ No ■ Yes.	sits of money	ngs, or other financial accou		h	\$40.00
Exam No Yes. 17. Depos Exam No	sits of money	ngs, or other financial accou	Cas	h	\$40.00
Exam No Yes. 17. Depos Exam No	sits of money ples: Checking, savi institutions. If y	ngs, or other financial accou	Cas unts; certificates of deposit; shares in credit unio with the same institution, list each.	h ns, brokerage h	\$40.00
Exam No Yes. 17. Depos Exam No Yes.	sits of money pples: Checking, savii institutions. If y	ngs, or other financial accounts of the first accounts with broken accounts with account with account with a country with a	Ints; certificates of deposit; shares in credit union with the same institution, list each. Institution name: Wells Fargo Bank - Overdrawn at tailing terage firms, money market accounts	h ns, brokerage h	\$40.00 nouses, and other similar
Exam	sits of money sples: Checking, savii institutions. If y	ngs, or other financial accounts of the first of the firs	Ints; certificates of deposit; shares in credit union with the same institution, list each. Institution name: Wells Fargo Bank - Overdrawn at tailing terage firms, money market accounts	h ns, brokerage h ime of	\$40.00 nouses, and other similar \$0.00

De	ebtor 1	Andre A Small			Case number (if known) 2	0-19290
			Small Property Managemen Location: 9402 HIGH ROCK MD 21117		%	\$500.00
	Negoti Non-ne ■ No	able instruments incl	e bonds and other negotiable and ude personal checks, cashiers' ches are those you cannot transfer to so	ecks, promissory notes, and	I money orders.	
	— 163.	Oive specific informa	Issuer name:			
21.	Examp	nent or pension acoules: Interests in IRA,	counts ERISA, Keogh, 401(k), 403(b), thri	ift savings accounts, or othe	er pension or profit-sharing pla	ns
	■ No □ Yes.	List each account se		stitution name:		
22.	Your s Examp		payments eposits you have made so that you h landlords, prepaid rent, public utili			s, or others
	■ No □ Yes.		Ins	stitution name or individual:		
	Annuiti ■ No □ Yes		periodic payment of money to you,	either for life or for a numbe	er of years)	
24.		s in an education II C. §§ 530(b)(1), 529	RA, in an account in a qualified A A(b), and 529(b)(1).	BLE program, or under a	qualified state tuition progra	am.
	■ No □ Yes	Institu	ition name and description. Separat	tely file the records of any ir	nterests.11 U.S.C. § 521(c):	
			interests in property (other than	anything listed in line 1),	and rights or powers exerci	sable for your benefit
		Give specific inform	ation about them			
26.			marks, trade secrets, and other in names, websites, proceeds from ro		ements	
	☐ Yes.	Give specific inform	ation about them			
	Examp ■ No		other general intangibles s, exclusive licenses, cooperative as ation about them	ssociation holdings, liquor li	censes, professional licenses	
M	oney or	property owed to y	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref ■ No	unds owed to you				·
	☐ Yes.	Give specific informa	ation about them, including whether	you already filed the return	ns and the tax years	
	Examp ■ No	support bles: Past due or lum	p sum alimony, spousal support, ch	nild support, maintenance, c	divorce settlement, property se	ttlement

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Deb	otor 1	Andre A Small	Case number (if known)	20-19290
_	Examp _	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benef benefits; unpaid loans you made to someone else	its, sick pay, vacation pay, workers' comper	nsation, Social Security
_	■ No □ Yes.	Give specific information		
	Interes	ts in insurance policies bles: Health, disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's insurar	ice
_	No			
	☑ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
_	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insume has died.		eive property because
		Give specific information		
		against third parties, whether or not you have filed a lawsuit oles: Accidents, employment disputes, insurance claims, or rights to		
	☐ Yes.	Describe each claim		
_	Other o	contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to	set off claims
_		Describe each claim		
	_ `	ancial assets you did not already list		
_	■ No □ Yes.	Give specific information		
36.		he dollar value of all of your entries from Part 4, including any art 4. Write that number here		\$540.00
Part	5: De:	scribe Any Business-Related Property You Own or Have an Interest In.	List any real estate in Part 1.	
	-	own or have any legal or equitable interest in any business-related pro	perty?	
		to Part 6.		
_	res. G	Go to line 38.		
Part		scribe Any Farm- and Commercial Fishing-Related Property You Own ou own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
46.	_ `	own or have any legal or equitable interest in any farm- or co	mmercial fishing-related property?	
	_	. Go to line 47.		
Part	7:	Describe All Property You Own or Have an Interest in That You Did N	Not List Above	
_		have other property of any kind you did not already list? bles: Season tickets, country club membership		
		Give specific information		
54.	Add t	he dollar value of all of your entries from Part 7. Write that nu	mber here	\$0.00

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Debto	or 1 Andre A Small		Case number (if known)	20-19290	
Part 8	List the Totals of Each Part of this Form				
55. F	Part 1: Total real estate, line 2				\$259,000.00
56. F	Part 2: Total vehicles, line 5	\$20,000.00			
57. F	Part 3: Total personal and household items, line 15	\$550.00			
58. F	Part 4: Total financial assets, line 36	\$540.00			
59. F	Part 5: Total business-related property, line 45	\$0.00			
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61. i	Part 7: Total other property not listed, line 54	+ \$0.00			
62. 1	Total personal property. Add lines 56 through 61	\$21,090.00	Copy personal property to	otal	\$21,090.00
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$	280,090.00

Fill in this info	rmation to identify your	case:		
Debtor 1	Andre A Small			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number	20-19290			
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp	Part 1:	Identify the P	roperty You	Claim as	Exemp
--	---------	----------------	-------------	----------	-------

1.	Which set of exemptions are	you claiming?	? Check one only	, even if	your spouse is filir	ng with	уои.
----	-----------------------------	---------------	------------------	-----------	----------------------	---------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption.
routine household furnishings and goods Location: 9402 HIGH ROCK WAY, Owings Mills MD 21117 Line from Schedule A/B: 6.1	\$350.00	\$350.00 Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
phone, tvs, Line from Schedule A/B: 7.1	\$200.00	\$200.00 Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
misc. clothing Location: 9402 HIGH ROCK WAY, Owings Mills MD 21117 Line from Schedule A/B: 11.1	\$0.00	\$0.00 Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
Cash Line from Schedule A/B: 16.1	\$40.00	■ \$40.00 □ \$100% of fair market value, up to any applicable statutory limit Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Small Property Management LLC Location: 9402 HIGH ROCK WAY, Owings Mills MD 21117 Line from Schedule A/B: 19.1	\$500.00	\$500.00 Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)

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Debt	tor 1	Andre A Small	Case number (if known)	20-19290
	•	you claiming a homestead exemption of more than \$170,350? ect to adjustment on 4/01/22 and every 3 years after that for cases filed or	n or after the date of adjustment.)	
		No		
	□ \	Yes. Did you acquire the property covered by the exemption within 1,215	days before you filed this case?	
	[□ No		
	[□ Yes		

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_							
Debtor 1	Andre A Small First Name	Middle Name Last Nam			-		
Debtor 2	i list Name	Middle Name Last Man	5				
(Spouse if, filing)	First Name	Middle Name Last Nam	е		-		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND			_		
Case number	20-19290						
(if known)						_	if this is an
						amend	led filing
Official Forn	n 106D						
		Who Have Claims Secu	rod	by Proport	``		40/45
<u>scriedule</u>	D. Creditors	Who Have Claims Secu	eu	by Propert	<u>y</u>		12/15
	e Additional Page, fill it o	If two married people are filing together, both a out, number the entries, and attach it to this for					
•	have claims secured by	your property?					
	_	nis form to the court with your other schedule	s. You	have nothing else	to re	port on this form.	
_	n all of the information		o. 10u	Thave floating clos	.0.0	port or time form.	
		Delow.					
	II Secured Claims			Column A	C	olumn B	Column C
		nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2.		Amount of claim		alue of collateral	Unsecured
		cal order according to the creditor's name.		Do not deduct the		at supports this	portion
2.1 CarMax A	uto Finance	Describe the property that secures the claim:		value of collateral. \$26,264.00		aim \$20,000.00	If any \$6,264,00
Creditor's Nam		Car	7 -	420,20 1100		Ψ20,000.00	<u> </u>
Attn: Ban		As of the date you file, the claim is: Check all th.	 h				
Po Box 4		apply.	11				
	w, GA 30160	Contingent					
Number, Stree	t, City, State & Zip Code	Unliquidated					
Who owes the de	aht? Chaak ana	Disputed					
_	ebt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only			r secur	ea			
Debtor 2 only		_					
Debtor 1 and D	•	Statutory lien (such as tax lien, mechanic's lie	n)				
_	the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this c community de		Other (including a right to offset)					
	Opened						
	05/18 Last						

6320

Last 4 digits of account number

Active

Date debt was incurred 7/24/20

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Debtor 1 Andre A Small		Case number (if known) 20-19290				
First Name Middle N	Name Last Name					
2.2 Freedom Mortgage	Describe the property that secures the claim:	\$225,000.00	\$259,000.00	\$0.00		
Creditor's Name	9402 High Rock Way Owings Mills, MD 21117 Baltimore County					
PO Box 4001 Fishers, IN 46038	As of the date you file, the claim is: Check all that apply. ☐ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$251,264	.00			
If this is the last page of your form, add Write that number here:	I the dollar value totals from all pages.	\$251,264	1.00			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this in	formation to identify your	case:					
Debtor 1	Andre A Small						
	First Name	Middle Nar	ne	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Nar	me	Last Name			
		DIOTRIOT	5 144 D) ((41) D				
United States	Bankruptcy Court for the:	DISTRICTO	F MARYLAND				
Case number	20-19290						
(if known)							Check if this is an
						a	mended filing
Official Ec	orm 106E/F						
	E/F: Creditors W	ho Hava	Uncocurod	l Claime			12/15
	and accurate as possible. Us				Port O for overliters	with NONDDIODITY als	
Schedule G: Ex Schedule D: Cro left. Attach the name and case	contracts or unexpired leases ecutory Contracts and Unexp editors Who Have Claims Sec Continuation Page to this pag number (if known).	ired Leases (Off ured by Property e. If you have no	icial Form 106G). y. If more space is o information to re	Do not include needed, copy	any creditors with the Part you need,	partially secured claims fill it out, number the en	that are listed in tries in the boxes on the
	editors have priority unsecure						
_ ′	. ,	u ciaims againsi	: you r				
■ No. Go	to Part 2.						
☐ Yes.							
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured	Claims				
3. Do any cre	editors have nonpriority unsec	ured claims aga	ainst you?				
	ı have nothing to report in this p	_	<u> </u>	n vour other ech	adulas		
_	rnave nothing to report in this p	art. Odbiriit tiilo ic	will to the court with	r your outer som	oddies.		
Yes.							
unsecured	your nonpriority unsecured cl claim, list the creditor separately editor holds a particular claim, li	/ for each claim. I	For each claim liste	d, identify what t	ype of claim it is. De	o not list claims already inc	cluded in Part 1. If more
							Total claim
4.1 Calv	in Watkins	ı	Last 4 digits of ac	count number	0147		Unknown
•	iority Creditor's Name					=	
	(im Parker Esq.	,	When was the deb	ot incurred?	-		_
	Maryland Avenue more, MD 21218						
Numbe	er Street City State Zip Code ncurred the debt? Check one.		As of the date you	file, the claim	s: Check all that ap	pply	
_	btor 1 only	1	☐ Contingent				
	•		Unliquidated				
	btor 2 only		■ Disputed				
	btor 1 and Debtor 2 only		Disputed Type of NONPRIO	RITY unsecure	d claim:		
	least one of the debtors and and	Juici	Student loans				
L Ch debt	eck if this claim is for a com	numity		ing out of a sena	ration agreement o	r divorce that you did not	
Is the	claim subject to offset?		report as priority cla			jou dia not	
■ No			Debts to pensio	n or profit-sharin	g plans, and other	similar debts	
☐ Ye	s		Other. Specify	Personal In Court	jury Claim - B	Balt County Circuit	-

Debtor	1 Andre A Small		Case number (if known) 20-19290	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3450	\$502.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 06/18 Last Active 8/24/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I	
4.3	Comenity Bank/Express Nonpriority Creditor's Name	Last 4 digits of account number	6419	\$1,537.00
	Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 03/15 Last Active 9/02/20	
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	count	
4.4	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	3725	\$1,997.00
	Attn: Bankruptcy Pob 182125	When was the debt incurred?	Opened 4/12/12 Last Active 7/02/20	
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	- ·	
	Yes	■ Other. Specify Charge Acc	count	

Official Form 106 E/F

Debtor	1 Andre A Small		Case number (if known) 20-19290	
4.5	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	4911	\$1,980.00
	Attn: Bankruptcy Pob 182125 Columbus, OH 43218	When was the debt incurred?	Opened 04/12 Last Active 9/02/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecure Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Charge Ac	count	
4.6	Department of Education/582/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	2425	\$13,301.00
	Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 08/14 Last Active 8/01/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	al .	
4.7	Department of Education/582/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	<u>7727</u>	\$10,683.00
	Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 08/16 Last Active 8/01/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	ng pians, and other similar debts	
	☐ Yes	Other, Specify		

Official Form 106 E/F

Educational

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Debto	Andre A Small		Case number (if known) 20-19290	
4.8	First Savings Bank/Blaze Nonpriority Creditor's Name	Last 4 digits of account number	1020	\$782.00
	Attn: Bankruptcy Po Box 5096 Sioux Falls, SD 57117	When was the debt incurred?	Opened 07/14 Last Active 1/24/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.9	Jefferson Capital Systems, LLC Nonpriority Creditor's Name	Last 4 digits of account number	893x	\$2,666.36
	16 McLeland Rd Saint Cloud, MN 56303	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Webbank C	• •	
4.1				
0	Merrick Bank	Last 4 digits of account number	<u>4513</u>	\$3,420.05
	Nonpriority Creditor's Name PO Box 9201 Old Bethpage, NY 11804	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other Specify Collection		

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Debto	r 1 Andre A Small		Case number (if known) 20-19290	
4.1 1	Portfolio Recovery	Last 4 digits of account number	4375	\$8,672.00
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd Norfolk, VA 23502	When was the debt incurred?	Opened 12/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Factoring (Company Account Carbiz Ltd	
4.1	Divor Advantage			\$12,000.00
2	River Advantage Nonpriority Creditor's Name	Last 4 digits of account number		\$12,000.00
	Forward Financial	When was the debt incurred?		
	100 Summer St Suite 1175			
	Boston, MA 02110			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L.L.C.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	·	• •	
	☐ Yes	Other. Specify Revenue P	urchase Agreement	
4.1 3	Synchrony Bank/Walmart	Last 4 digits of account number	6160	\$341.00
	Nonpriority Creditor's Name		Opened 00/42 Last Active	
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 09/13 Last Active 10/21/14	
	Orlando, FL 32896		10/21/14	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	

Official Form 106 E/F

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Debto	r1 Andre	A S	Small		Case n	umber (if known)	20-19290		
4.1	The Pres		e At Manor Woods	Last 4 digits of account number	7913	3		\$7,452.25	
	Group, li	nme nc. herr 9	rical Management ry Lane Court	When was the debt incurred?					
	Number Str	eet C	City State Zip Code he debt? Check one.	As of the date you file, the claim	is: Chec	k all that apply			
	■ Debtor 1			☐ Contingent					
	Debtor 2	only	, ,	☐ Unliquidated					
			l Debtor 2 only	☐ Disputed					
	_		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
			s claim is for a community	☐ Student loans					
	debt		oject to offset?	☐ Obligations arising out of a sep report as priority claims	paration a	greement or divorce	that you did not		
	■ No			☐ Debts to pension or profit-shar	ing plans,	and other similar de	bts		
	☐ Yes			Other. Specify Condo Fee	es Arre	ars and attorne	y fees		
is try have notif Name	this page only ring to collect more than or ied for any de and Address	y if y t froi ne c ebts	ou have others to be notified in you for a debt you owe to s reditor for any of the debts th in Parts 1 or 2, do not fill out	On which entry in Part 1 or Part 2 did yo	in Parts 1 ditional c	or 2, then list the creditors here. If you original creditor?	ollection agency h	ere. Similarly, if you onal persons to be	
	Bierer Law ox 41667	Gr	oup PA		ine 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims				
	more, MD 2	212	03						
				Last 4 digits of account number	8	199			
Wine Leav Rory 400 F	itt Parks Esc Redland Co	վ. ourt	iedman and , Suite 212	-	☐ Part 1:	original creditor? Creditors with Priori Creditors with Nonp	-		
Owir	ıgs Mills, N	/ID 2	21117	Last 4 digits of account number					
Part 4	Add the	e An	nounts for Each Type of U	nsecured Claim					
	I the amounts of unsecured			aims. This information is for statistical	reporting	g purposes only. 28	U.S.C. §159. Add tl	ne amounts for each	
						Total	Claim		
Total claims		6a.	Domestic support obligation	ns	6a.	\$	0.00		
from F		6b.	Taxes and certain other deb	ts you owe the government	6b.	\$	0.00		
		6c.	· ·	I injury while you were intoxicated	6c.	\$	0.00		
		6d.	Other. Add all other priority un	secured claims. Write that amount here.	6d.	\$	0.00		
		6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	0.00		
						Total	Claim		
Total		6f.	Student loans		6f.	\$	23,984.00		
claims from F		6g.	Obligations arising out of a	separation agreement or divorce that	•	•	0.00		
		6h.	you did not report as priority Debts to pension or profit-si	y claims haring plans, and other similar debts	6g. 6h.	\$ 	0.00		
		6i.		y unsecured claims. Write that amount	6i.	<u> </u>			
			here.			\$	41,349.66		

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Debtor 1 Andre A Small Case number (if known) 20-19290

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 65,333.66

Fill in this inforn	nation to identify your	case:		
Debtor 1	Andre A Small			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND		
Case number	20-19290			
(if known)				☐ Check if this is a
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	- ity		Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	

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Fill in this	information to identify your	case:			
Debtor 1	Andre A Small				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF MARYLA	ND		
Case numb	ber 20-19290				
(if known)					☐ Check if this is an
					amended filing
Official	l Form 106H				
		-1-1			
sched	lule H: Your Cod	ebtors			12/15
1. Do <u>y</u>	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes	3				
	hin the last 8 years, have you a, California, Idaho, Louisiana				
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person showr ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor				editor to whom you owe the debt
1	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	
-	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	
	Number Street			_	
	City	State	ZIP Code		

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Debtor 2 (Spouse, if filing)				
United States Bankrupto	y Court for the	: DISTRICT OF MARY	LAND	
Case number (If known)	9290		-	Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u> 1061</u>			MM / DD/ YYYY
Schedule I: Y	our Inc	ome		12/1
Be as complete and acc supplying correct inform spouse. If you are sepa	mation. If you rated and you	are married and not filing wi	ng jointly, and your spouse is livin ith you, do not include information	g with you, include information about your about your about your spouse. If more space is needed,
Be as complete and acc supplying correct informations in the separate separate sheet Part 1: Describe 1. Fill in your employ	mation. If you rated and you to this form.	are married and not filing wi	ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and c	g with you, include information about your about your about your spouse. If more space is needed, ase number (if known). Answer every questio
Be as complete and acc supplying correct informations. If you are separate sheet Part 1: Describe 1. Fill in your employinformation.	mation. If you rated and you to this form. Employment yment	are married and not filing wi ir spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and o	g with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every questic Debtor 2 or non-filing spouse
Be as complete and acc supplying correct informations in the separate separate sheet Part 1: Describe 1. Fill in your employ	mation. If you rated and you to this form. Employment yment an one job, hage with	are married and not filing wi	ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and c	g with you, include information about your about your about your spouse. If more space is needed, ase number (if known). Answer every questic
Be as complete and acc supplying correct information. Be as complete and acc supplying correct information. Be as complete and acc supplying correct information. Be as complete and acc supplying correct information.	mation. If you rated and you to this form. Employment yment an one job, hage with	are married and not filing wi ir spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and complete the page of	g with you, include information about your about your spouse. If more space is needed, asse number (if known). Answer every question Debtor 2 or non-filing spouse Employed
Be as complete and acc supplying correct information. Part 1: Describe 1. Fill in your employ information. If you have more thattach a separate p information about a	mation. If you rated and you to this form. Employment yment an one job, age with additional heasonal, or	are married and not filing wi on the top of any additi	ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and complete the pages. Debtor 1 Employed Not employed	g with you, include information about your about your spouse. If more space is needed, ease number (if known). Answer every questic Debtor 2 or non-filing spouse Employed Not employed
Be as complete and acc supplying correct information. If you have more thattach a separate pinformation about a employers. Include part-time, s	mation. If you rated and you to this form. Employment yment an one job, aage with additional easonal, or colude student	are married and not filing wi on the top of any additi Employment status	pebtor 1 Employed Not employed Property Manager Small Property Management	g with you, include information about your about your spouse. If more space is needed, ease number (if known). Answer every questio Debtor 2 or non-filling spouse Employed Not employed

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or

For Debtor 1

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 4,300.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Andre A Small	_	С	Case number (if kr	own)	20-19	290	
	Сор	y line 4 here	4.		For Debtor 1	0.00		Debtor 2 or filing spouse 4,300.00	
5.	Lict	all payroll deductions:							_
5.			Fo		\$ 0		¢.	0.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.		·	0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		:	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		<u> </u>	0.00	\$	0.00	_
	5e.	Insurance	5e.			0.00	\$	0.00	_
	5f.	Domestic support obligations	5f.		\$.00	\$	0.00)
	5g.	Union dues	5g.			0.00	\$	0.00	_
	5h.	Other deductions. Specify:	5h.	.+	\$	0.00	+ \$	0.00	<u> </u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$	0.00	\$	0.00	<u>) </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ C	0.00	\$	4,300.00	<u>) </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 1.500	۰.00	\$	0.00	
	8b.	Interest and dividends	8b.		: .,,,,,	0.00	\$—	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		•	*	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Ψ	0.00	<u>^</u>
		settlement, and property settlement.	8c.			0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.			0.00	\$	0.00	_
	8e.	Social Security	8e.		\$	0.00	\$	0.00	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$ 0	0.00	\$	0.00)
	8g.	Pension or retirement income	 8g.		\$ 0	0.00	\$	0.00	<u> </u>
	8h.	Other monthly income. Specify:	8h	.+	\$ 0	0.00	+ \$	0.00)
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,500	0.00	\$	0.0	00
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,500.00	+ \$	4,30	00.00 = \$	5,800.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,	_			,
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12. \$	5,800.00
40	r -		^						ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	•						

Official Form 106l Schedule I: Your Income page 2

Fill in this info	mation to identify	ur coco			ı		
Debtor 1	rmation to identify yo				Oh -	ak if this is:	
Deptor 1	Andre A Sma	all			Che	ck if this is: An amended filing	
Debtor 2							wing postpetition chapter
(Spouse, if filing)					13 expenses as of	the following date:
United States Ba	ankruptcy Court for the	DISTR	ICT OF MARYLAND			MM / DD / YYYY	
Case number (If known)	20-19290						
Official I	Form 106J				•		
Schedu	le J: Your l	Exper	nses				12/1
information. I number (if kn		eded, atta y questio	. If two married people ar ach another sheet to this on.				
1. Is this a	joint case?						
_	o to line 2. Does Debtor 2 live i	in a separ	rate household?				
	No Yes. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	otor 2.	
2. Do you h	nave dependents?	■ No					
Do not lis Debtor 2	et Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do not st	ate the						□ No
	nts names.						☐ Yes
							□ No
						_	Yes
							□ No
							☐ Yes
							□ No
2 Do your	ovnoncos includo	_					☐ Yes
expense	expenses include s of people other the and your depende	han _	l No l Yes				
Estimate you	of a date after the b	our bankr	ly Expenses uptcy filing date unless y cy is filed. If this is a supp				
Include experting the value of s	uch assistance and	non-cash d have in	government assistance i cluded it on <i>Schedule I:</i>)	f you know our Income		Your exp	enses
	al or home owners s and any rent for the		nses for your residence. In or lot.	nclude first mortgag	e 4. :	\$	1,740.00
If not inc	luded in line 4:						
4a. Re	al estate taxes				4a.	\$	0.00
	operty, homeowner's	s, or rente	r's insurance		4b.	·	0.00
	me maintenance, re				4c.	\$	150.00
	meowner's associat				4d.	·	200.00
5 Addition	al mortgage navme	ents for v	our residence , such as ho	ma aquity Inans	5	\$	0.00

Debtor	Andre A Small	Case number (if known)	20-19290
e 114	lition.		
6. Ut i 6a	lities: Electricity, heat, natural gas	6a. \$	300.00
6b	•	6b. \$	0.00
6c.		6c. \$	565.00
6d		6d. \$	0.00
	od and housekeeping supplies	7. \$	715.00
	ildcare and children's education costs	8. \$	
		9. \$	0.00
	othing, laundry, and dry cleaning	·	150.00
	rsonal care products and services	10. \$	65.00
	dical and dental expenses	11. \$	150.00
	ansportation. Include gas, maintenance, bus or train fare. not include car payments.	12. \$	500.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
	aritable contributions and religious donations	14. \$	80.00
	Gurance.	14. φ	00.00
	not include insurance deducted from your pay or included in lines 4 or 20.		
	a. Life insurance	15a. \$	133.00
	b. Health insurance	15b. \$	0.00
_	c. Vehicle insurance	15c. \$	300.00
	d. Other insurance. Specify:	15d. \$	0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.	ισα. ψ	0.00
_	ecify:	16. \$	0.00
	stallment or lease payments:	47 - A	252.00
	a. Car payments for Vehicle 1	17a. \$	659.00
	c. Car payments for Vehicle 2	17b. \$	650.00
	c. Other. Specify:	17c. \$	0.00
	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not report a		0.00
	ducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). her payments you make to support others who do not live with you.		0.00
	ecify:	19.	0.00
	her real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>		
	a. Mortgages on other property	20a. \$	0.00
	b. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
		· · · · · · · · · · · · · · · · · · ·	
	her: Specify:	21. +\$	0.00
	Iculate your monthly expenses		
	a. Add lines 4 through 21.	\$	6,507.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.	\$	6,507.00
3. Ca	Iculate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,800.00
	o. Copy your monthly expenses from line 22c above.	23b\$	6,507.00
	• • •		2,221,00
23	c. Subtract your monthly expenses from your monthly income.	23c. \$	-707.00
	The result is your monthly net income.	230. Ψ	101.00
Foi	you expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect your mortgage?		rease or decrease because o
	dification to the terms of your mortgage?		
	No.		
	Yes Explain here:		

Fill in this info	ormation to identify your	case:		
Debtor 1	Andre A Small			
	First Name	Middle Name	Last Name	_
Debtor 2				_
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	DISTRICT OF MARYLAND		_
Case number	20-19290			
(if known)				☐ Check if this is an amended filing
Declara If two married You must file tobtaining mon	people are filing togethe	r, both are equally responsible le bankruptcy schedules or an n connection with a bankruptc		
	ign Below			
Did you p	oay or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy for	ms?
■ No				
☐ Yes.	Name of person			th Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the summary a	and schedules filed with this dec	claration and
	ndre A Small		X	
	re A Small ture of Debtor 1		Signature of Debtor 2	
Date	November 11, 2020		Date	